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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

Do not enter Social Security numbers on this form as it may be made public.
 Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For the 2	2013 cale	endar year, or tax year beginning January 1 , 2013, and ending	<u>Decen</u>	ber 31	, 20 13
В	Check if a	pplicable	C Name of organization Arizona Foundation for Legal Services and Education		D Employ	er identification number
	Address c	hange	Doing Business As			95-3351710
	Name cha	nge	Number and street (or P O box if mail is not delivered to street address) Room/suit	e	E Telepho	ne number
$\overline{\Box}$	Initial retur	-	4201 N. 24th Street 2	110		(602) 340-7366
\Box	Terminate		City or town, state or province, country, and ZIP or foreign postal code			1002/0.00.000
\exists	Amended		Phoenix, AZ 85016	1	G Gross re	eceipts \$ 3,632,389
\exists	Application			H(a) is this a or		subord nates? Yes No
	дрисаци	n pending	4201 N. 24th Street, Phoenix, AZ 85016	1		s included? Yes No
_	Tax-exem		✓ 501(c)(3)			a list (see instructions)
÷	Website:		W.AZFLSE.ORG	H(c) Group		
K			✓ Corporation Trust Association Other ► L Year of formation			
	art I	Summ		on 1978	M State	of legal domicile AZ
				ad for about		I advantanal monana
•			escribe the organization's mission or most significant activities: Organiz			
Activities & Governance	1 -		ter and maintain the integrity of the legal profession, (b) study, improve and			
Ë			ote continuing education for lawyers, and (D) promote legal education and d			
Š	1		his box if the organization discontinued its operations or disposed of		1 -	
ŏ			of voting members of the governing body (Part VI, line 1a)		3	23
οδ	I .		of independent voting members of the governing body (Part VI, line 1b)		4	23
語			mber of individuals employed in calendar year 2013 (Part V, line 2a)		5	17
亲			mber of volunteers (estimate if necessary)		6	989
ĕ			related business revenue from Part VIII-column (C), line 12		7a	0
	<u>b N</u>	let unre	lated business taxable income from Form 990-1, line 34	<u> </u>	7b	0
				Prior Ye	ar	Current Year
<u>o</u>			itions and grants (Part VIII,∰he 1h),∧∆Y. 1 ᠑ 2014 . [♡] [2	,792,371	3,316,491
Revenue	9 F	Program	service revenue (Part VIII, Nhe 2g)		56,825	94,905
ě			ent income (Part VIII, column (A), lines 3, 4, and 7d)		-9,910	17,874
•			venue (Part VIII, column (A), lines 3,6d,8c,9c, 19c, and 11e)		0	
	12 T	otal reve	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		,839,286	3,429,270
	13 (Grants a	nd similar amounts paid (Part IX, column (A), lines 1-3)	1	,373,987	1,895,093
	14 E	Benefits :	paid to or for members (Part IX, column (A), line 4)		0	
ø	15 9	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)	1	083,465	1,055,055
8	16a F	rofessio	onal fundraising fees (Part IX, column (A), line 11e)		0	
Expenses			draising expenses (Part IX, column (D), line 25) ▶ 76,798		,	10 - 70 x 1 x 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ũ	1		penses (Part IX, column (A), lines 11a-11d, 11f-24e)		536,366	594,182
		-	penses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2	993,818	3,544,330
		•	less expenses. Subtract line 18 from line 12		154,532	-115,060
> 8				eginning of Cui		End of Year
age age	20 T	otal ass	sets (Part X, line 16)	1	022,947	1,115,347
SS B	21 T		plities (Part X, line 26)	· · · · · ·	413,042	597,368
Net Assets or Fund Balances	22 N		ts or fund balances. Subtract line 21 from line 20		609,905	517,979
	art II		ture Block		000,000	311,010
			iry, I declare that I have examined this return, including accompanying schedules and statem	ents, and to th	e hest of r	ny knowledge, and helief it is
			lete Declaration of preparer (other than officer) is based on all information of which preparer			1 A 1 A
		1	Paris (Scena C) (DU 10 11 11	Mr. (1)	9 7	3114114
Sig	ın	Sign	ature of officer	Dat	e .	~
He		Ke	evin Ruegg, Executive Director/CEO	Tulie	117	Usan (Fo
•••			e or print name and title	2 WILL	<u> </u>	TICH I CI C
_	L	<u> </u>	pe preparer's name Preparer's sygnature Date	9 1		PTIN
Pa		1	RT N SNYDER MAGE S	114/14	Check (<u> </u>
	eparer		DOCEST WOUNDED ON THE	/ · T/ /		
Us	e Only	Firm's n			's EIN ▶	46-0855335
Mar	the IDS		address ► 1166 E WARNER RD, STE 101, GILBERT AZ 85296 s this return with the preparer shown above? (see instructions)	Phor	ie no	480-688-9769
				* * * *	····	V Yes No
LAV	-anarwa	THE WARLE	COUNT ACT MOTICE COR THE CONGRETE INCOMINGTIONS	11292		LANS MEM 1/2/12\

	90 (2013)				Page
Part		nent of Program Service		5	
1		it schedule O contains a r		s Part III	· · · · <u>·</u>
•	•	-			
			·····		
2	prior Form 99	90 or 990-EZ?		e year which were not listed on the	☐Yes ☑No
3	Did the orga		g, or make significant changes i	n how it conducts, any program	☐ Yes ☑ No
		cribe these changes on Sch			les 🖭 140
4	Describe the expenses. Se	organization's program ser ection 501(c)(3) and 501(c)(4	vice accomplishments for each of	its three largest program services, port the amount of grants and alloc	as measured beations to others
4a	(Code:) (Expenses \$	718,119 including grants of \$	6,269) (Revenue \$	94,905)
	SERVICES. W FINANCIAL AS AWARENESS 300.000 ARIZO	E OFFER CURRICULUM. TRA SSISTANCE. THESE SERVIC TO YOUTH SO THAT THEY V DNA CHILDREN BENEFITTED	NINING. SCHOLARSHIPS. MENTORIN ES ARE OFFERED TO INDIVIDUALS VILL INCREASE THEIR UNDERSTAN FROM OUR PROGRAM SERVICES	SS TO JUSTICE FOR ALL. WITH THE IG RECOGNITION AWARD PROGRAM AND ENTITITES PROMOTING FREE EDING OF THEIR ROLE AS GOOD CITUTED THE OUT OF THEIR ROLE AS GOOD CITUTED THE OUT OF T	IS AND DUCATION AND ZENS. OVER ITICIPANTS.
4b	(Code:) (Expenses \$ 2	589 668 including grants of \$	1,888,824) (Revenue \$	
40				JUSTICE FOR ALL. WITH THESE PR	
				ON AND AWARD PROGRAMS AND FIN	
				ES.PROMOTING FREE LEGAL SERVI	
				DIRECT FINANCIAL AND LEGAL SUP	
				ED.WEBSITES. OVER 48,000 ARIZON ND VOLUNTEERS. OUR WEBSITES A	
				S ARE RECEIVING THE LEGAL ANSW	
	NEED				
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
		·			

4d	Other program	m services (Describe in Scho	edule O.)	,	·
	(Expenses \$	including gr		ıe\$)	

3,307,787

4e Total program service expenses ▶

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III	8	1	<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	•	1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	•	1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	!	✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		· ·
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<u>▼</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.			1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	18		√
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		/
-	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u> </u>

Part	IV Checklist of Required Schedules (continued)			
_			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
24a	employees? If "Yes," complete Schedule J	23 24a		√
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		√
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>√</u>
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	35b		· /
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R,</i>	36		
38	Part VI	37		✓
	19? Note. All Form 990 filers are required to complete Schedule O	38	1	

Form **990** (2013)

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		<u>. </u>	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 26	₹		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	}		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<u> </u>		 -
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	✓	
2a	Statements, filed for the calendar year ending with or within the year covered by this return 2a 17			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b		1
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			١.
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country:			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		<u> </u>
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	- <u>-</u>		
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		
·	required to file Form 8282?	7c		
ď	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
. b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter			
a b	Gross income from members or shareholders		-	
-	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		l	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
p_	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	}		
С	the organization is licensed to issue qualified health plans			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		•

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	See in	struci	tions.
<u>Secti</u>	ion A. Governing Body and Management			
_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	✓	1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	-	1
6	Did the organization have members or stockholders?	6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	1	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9 Socti	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	oae.) Yes	
10a	Did the organization have local chapters, branches, or affiliates?	10a	res	No /
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a 10b		-
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1	•	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	√	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	√	
14	Did the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	✓	
b	Other officers or key employees of the organization	15b	✓	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		✓_
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
0:-::	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ AZ			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply	501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of integration in the statements available to the public during the tax year.	erest	oolicy	, and
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: THE ORGANIZATION, 4201 N. 24TH STREET, SUITE 210, PHOENIX, AZ (602) 340-7366	of the		
	THE STRUMBER 1998, 3401 N. 441 H.3 INCEL. 3011 E 210, PROCENIA, AZ 10021 340-7300			

orm 990 (201:	2١	

Page 7

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	and
	Independent Contractors	

Check if Schedule O contains a response or note to any line in this Part VII				1	

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
					C)					
(A)	(B)	Position (do not check more than one				a than i	ona	(D)	(E)	(F)
Name and Title	Average	box, unless person is both an			n an	Reportable	Reportable	Estimated		
	hours per week (list any	Sincer and a director/tractor/		compensation from	compensation from related	amount of other				
	hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	dual	ution	4	m p	st co	 •	(W-2/1099-MISC)		organization
	below dotted line)	rus	al tr		oyee) mg				and related organizations
		tee	uste			ensa	i			. 3
				_		ted			···	
(1) HON LAWRENCE WINTHROP	2.00							j		
TREASURER		✓		✓						
(2) HON, THOMAS J. BERNING	2.00	,								
BOARD MEMBER		✓								
(3) JEFFREY BRODIN	2.00	,								
BOARD MEMBER		✓								<u> </u>
(4) TOM GIALLANZA	2.00	✓		1						
PRESIDENT ELECT		V		V						·
(5) PETER S. DAVIS	2.00	1								
BOARD MEMBER							-			
(6) RODNEY GLASSMAN	2.00	1								
BOARD MEMBER		•								
(7) KIMBERLY A. DIMARCHI	2.00	1								
8) MATT EISCUED	2.00	•		_						
(8) MATT FISCHER VICE PRESIDENT	2.UU!	1		1						
(9) FAITH C. KLEPPER, ESO.	2.00	•		Ť				_		
BOARD MEMBER	2.20	1								
(10) HON JOSEPH KREAMER	2.00									
BOARD MEMBER		✓								
(11) TODD LANG	2.00		ĺ							
PRESIDENT		✓		✓	ļ					
(12) DAMON L. BOYD	2.00				l					
BOARD MEMBER		✓								
(13) MATTHEW BINFORD	2.00									
BOARD MEMBER		✓		_						
(14) ROBIN R. MITCHELL	2.00									
BOARD MEMBER		✓								

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
					-	C)								
	(A) (B) Position (D) (E							(E)			(F)			
	Name and title	Average	box,	unles	s pe	rson	is both	n an	Reportable	Reportab			mated	
		hours per week (list any		_		irect	or/trust		compensation	compensation related			ount of ther	
		hours for	Individual trustee or director	Institutional truste	Officer	<u>@</u>	en H	Former	the	organizatio		_	ensatio	on
		related			Cer	Key employee	bloy	Ther	organization (W-2/1099-MISC)	(W-2/1099-N	/ISC)		n the	_
		organizations below dotted	호호	ona		탕	8 8		(W-2/1099-MISC)			-	nizatior related	
		line)	rust	2		è	npe	l					ızatıon	
			8	stee			Highest compensated employee							
							8.							
(15) _{CI}	ARICE A. SPICKER	2.00									İ			
	D MEMBER		✓											
(16) _M	EREDITH PEABODY.	2.00												
	D MEMBER		✓											
(17) _{RI}	CHARD PLATT	2.00												
	D MEMBER		✓					ļ						
(18) D	OMINGOS RIBAS SANTOS	2.00												
	D MEMBER		✓						-					
	EOFFREY STURR	2.00	,											
	D MEMBER		✓											
	ELEN PURCELL	2.00	,		/		İ							
	TARY		√		*		-							
	ON, ROXANNE K. SONG ONG	2.00	1								1			
	PRESIDENT		V		*			_						
	RISTINE THOMPSON	2.00												
	D MEMBER		•											
	NICE A. WEZELMAN	2.00	,											
	D MEMBER				\dashv						-			
	EVIN RUEGG	40.0Ω			/				128,000		-		,	9,300
(25)	JTIVE DIRECTOR/CEO				_				128,000	-				3,300
(23)														
1b	Sub-total							·	128,000					9,300
c	Total from continuation sheets to Part					•		•	120,000					-,000
d	Total (add lines 1b and 1c)	•						•	128,000				 ,	9,300
2	Total number of individuals (including but									ore than \$1	nn nnn	of		0,000
_	reportable compensation from the organi			000		Cui	10010	, •••	no received in	ore triair wr	00,000	0.		
	, ,								- <u>-</u>				Yes	No
3	Did the organization list any former of	ficer, direct	tor, o	r tru	uste	e, I	key e	mp	loyee, or high	est compe	nsated			
	employee on line 1a? If "Yes," complete \$	Schedule J	for su	ıch i	indi	vidu	ıal .					3		1
4	For any individual listed on line 1a, is the	sum of rep	ortab	ole c	com	per	satio	n ai	nd other comp	ensation from	om the			
	organization and related organizations	greater tha	an \$1	50,0	000	? If	"Yes	s, "	complete Sch	edule J fo	r such	1 1		
	ındividual											4		1
5	Did any person listed on line 1a receive o										livıdual			
	for services rendered to the organization?	of "Yes," c	omple	ete S	Sch	edu	le J fe	or s	uch person			5		✓
Section	n B. Independent Contractors													
1	Complete this table for your five highest of													
	compensation from the organization. Rep	ort comper	nsatio	n fo	r th	e ca	alenda	ar y	ear ending with	h or within t	the orga	anızatio	n's ta	ХE
	year.													
	(A)								(B)		_	(C)		
_	Name and business addi	C22							Description of se	or vices		Compensa	mon –	
									·					
														
												_		
2	Total number of independent contractor	rs (includio	a bu	t no	at Ji	mit	od to	th	nee lieted abo	אין איף				
-	received more than \$100,000 of compens							LI II	oso nateu abt	,, o, will				
									O					

Part VIII		Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII									
		Check if Schedule O contains a response or note	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514					
ts ts	1a	Federated campaigns 1a	1	- 10101100		0.20.1					
ran	b	Membership dues 1b	1	İ							
S, E	C	Fundraising events 1c	1								
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations 1d	1								
s, G mik	е	Government grants (contributions) 1e 2,919,325	<u> </u>								
ion	f	All other contributions, gifts, grants,	1 !								
基		and similar amounts not included above 1f 397,166	6								
a di	g	Noncash contributions included in lines 1a-1f: \$	1			1					
<u>ප</u>	h	Total. Add lines 1a–1f ▶	3,316,491								
_ e		Business Code									
ven	2a	LAW RELATED EDUCATION 900099	63,720	63,720							
2	b	MOCK TRIAL 900099	29,185	29,185							
Ğ.	С										
Š	d										
ram	e					<u> </u>					
Program Service Revenue	†	All other program service revenue .	2,000	2,000							
<u> </u>	3	Total. Add lines 2a–2f ▶ Investment income (including dividends, interest,	94,905			 					
	"	and other similar amounts)	15,873			15,873					
	4	Income from investment of tax-exempt bond proceeds ▶	10,073			13,073					
	5	Royalties				 -					
		(i) Real (ii) Personal									
	6a	Gross rents	1								
	Ь	Less: rental expenses	1 1								
	С	Rental income or (loss)	1								
	d	Net rental income or (loss)									
	7a	Gross amount from sales of (i) Securities (ii) Other									
		assets other than inventory 179,985]								
	b	Less. cost or other basis									
		and sales expenses 177,984									
	C	Gain or (loss)	 								
	d	Net gain or (loss)	2,001			2,001					
venue	8a	Gross income from fundraising events (not including \$									
Other Reve		of contributions reported on line 1c). See Part IV, line 18 a									
₹		Less [·] direct expenses b	<u> </u>	-							
		Net income or (loss) from fundraising events .									
	9a	Gross income from gaming activities.		ļ							
	١.	See Part IV, line 19	_	ľ							
		Less: direct expenses b Net income or (loss) from gaming activities b	 			<u> </u>					
		Gross sales of inventory, less									
	10a	returns and allowances a									
	b	Less: cost of goods sold b	-	1							
		Net income or (loss) from sales of inventory	 								
	_ <u> </u>	Miscellaneous Revenue Business Code	1			 					
	11a		 								
	b		 								
	С				<u> </u>	<u> </u>					
	d	All other revenue									
	е	Total. Add lines 11a–11d ▶									
	112	Total revenue. See instructions	2 420 270	04 005		17.974					

Part IX Statement of Functional Expenses

3	Section 501(c)(3) and 501(c)(4) organız	ations must complete all columns.	All other organizations m	ust complete column (A).

	on so reside and so resident organizations mast com	·			
	Check if Schedule O contains a respons	se or note to any lin		<u> </u>	
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,888,824	1,888,824		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	6,269	6,269		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	137,300	96,110	20,665	20,525
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	747,891	653,048	72,784	22,059
9	Other employee benefits	101,669	85,876	11,339	4,454
10	Payroll taxes	68,195	59,667	5,258	3,270
11	Fees for services (non-employees):			0,230	
a	Management				
b	Legal				
С	Accounting	18,001	14,846	2,093	1,062
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	49,077	47,022	2,055	
12	Advertising and promotion		7		·- ·- ·-
13	Office expenses	80,760	60,921	18,674	1,165
14	Information technology	35,987	32,827	3,160	1,100
15	Royalties	30,307	32,027	3,100	
16	· ·	144,486	120 007	605	7 104
	Occupancy		136,687	695	7,104
17	Travel	39,601	36,344	3,257	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	23,013	4,093	6,203	12,717
20	· — — — — — — — — — — — — — — — —	25,010	4,000	0,203	12,717
	<u> </u>	-			
21 22	Payments to affiliates	22.040	40 420	4 507	
	Depreciation, depletion, and amortization .	23,849	18,120	4,567	1,162
23	Insurance				
24	Other expenses. Itemize expenses not covered		İ		
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				. =
а	TRAINING	87,819	87,819		
b	DISTRICT COMPETITION-EXP	11,465	11,465		
С	GIFTS AND HONORARIUMS	23,043	18,736	3,481	826
d					
e	All other expenses 57,071	57,081	49,113	5,514	2,454
25	Total functional expenses. Add lines 1 through 24e	3,544,330	3,307,787	159,745	76,798
26	Joint costs. Complete this line only if the	5,5 / 1,000	5,001,101	100,710	70,730
20	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
					Form 990 (2013)

Form 990 (2013) Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year 9.890 1 8.947 2 Savings and temporary cash investments 2 20,468 9.743 3 3 4 224,886 4 284.041 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 7 116,469 150.353 Inventories for sale or use 8 a Prepaid expenses and deferred charges . . . 9 17.348 24.111 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 366,648 **b** Less: accumulated depreciation 10b 325,162 10c 41,486 58.982 Investments—publicly traded securities 684,800 11 11 486.770 12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related, See Part IV, line 11...... 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) . . 16 16 1,115,347 1.022.947 Accounts payable and accrued expenses 17 17 230.172 209.907 18 18 19 19 367,196 203.135 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 **Total liabilities.** Add lines 17 through 25 26 597.368 413.042 Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 304,503 27 481.562 28 28 213,476 128.343 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and

complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds.

Total liabilities and net assets/fund balances . _ _

30

31

32

33

34

517.979

1,115,347

30

31

32

33

34

609.905

1.022.947

Form 9	90 (2013)			P	age 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1			29,270
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,54	44,330
3	Revenue less expenses. Subtract line 2 from line 1	3		-11	15,060
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		60	9,905
5	Net unrealized gains (losses) on investments	5		2	23,134
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		51	7,979
Part	XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. 🗸
				Yes	No
1	Accounting method used to prepare the Form 990. Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın in	ŀ	ŀ	
	Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or			
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				<u> </u>
b	Were the organization's financial statements audited by an independent accountant?		2b	/	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a			
	separate basis, consolidated basis, or both:				
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	-			
	of the audit, review, or compilation of its financial statements and selection of an independent accou		2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain in			

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2013)

За

3b

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization						Employer i	dentification	on number		
ARIZONA FOUNDATION FOR LEGAL S								351710		
Part I Reason for Public Ch							ınstructı	ons.		
The organization is not a private foun	-		_		_	-				
1 A church, convention of chu				ed in se d	ction 170	(b)(1)(A)(i).			
2 A school described in section										
3 A hospital or a cooperative i										
4 A medical research organiza		ction with	h a hospit	tal descri	bed in se	ection 17	O(b)(1)(A)(iii). Ente	er the	
hospital's name, city, and st 5		ge or un	iversity o	wned or	operated	by a go	vernmen	ital unit d	lescrib	ed in
section 170(b)(1)(A)(iv). (Co	•				- 470(L)(4	4)/4)/.)				
 A federal, state, or local gov An organization that normal described in section 170(b) 	ly receives a substantia	al part of					nit or fro	m the ge	neral p	oublic
8 A community trust described	d in section 170(b)(1)(A)(vi). (Co	mplete Pa	art II.)						
9 An organization that normal receipts from activities relat support from gross investr acquired by the organization	ted to its exempt funct ment income and unre	tions—su lated bu	bject to o	certain e xable in	xceptions come (les	s, and (2 ss sectio) no mor	e than 3	31/3%	of its
10 An organization organized a	nd operated exclusively	to test fo	or public :	safetv S	ee sectio	n 509(a)	(4).			
11 An organization organized purposes of one or more p	and operated exclusiv	ely for th	ne benefi	t of, to	perform	the func	tions of,			
509(a)(3). Check the box tha	at describes the type of	supporti	ng organi	zation an	d comple	ete lines 1	11e throu	gh 11h.		
_a □ TypeI b □ Typ								tionally in	-	
e By checking this box, I certion other than foundation mana	,			•				•	•	
or section 509(a)(2)	La virittan datarminatu	on from	the IDC	that it ia	a Tuna	I Tupo	ll or Tu	مد اللحد		
f If the organization received organization, check this box		on from	the ins	ınaı ii is	атуре	i, Type	ii, or iy	pe III sup	porur	ig _
0 4 147 0000 1		 ntad anv	gift or co	 Optribute	n from a	nv of the				Ш
g Since August 17, 2006, has following persons?	the organization acce	pied arry	girt or co	onuibuu)	illy Of the	•			
(i) A person who directly o					persons	describe	d in (ii) a	nd	Yes	No
(iii) below, the governing	- · · · · · · · · · · · · · · · · · · ·		ion?	• •				11g(i)		
(ii) A family member of a pe								11g(ii)		
(iii) A 35% controlled entity of								11g(iii)	Ĺ
h Provide the following informa	- 	r				т-				
(i) Name of supported (ii) EIN organization	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (i) li	organization sted in your document?	the orga	ou notify nization in of your port?	organiza (i) organ	Is the tion in col ized in the S?	(vii) Amou	nt of mo ipport	netary
		Yes	No	Yes	No	Yes	No	1		
(A)								İ		
(B)	-	 -	<u> </u>							
				1						
(C)										
(D)										
(E)										
			<u> </u>		1		+	†		

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,610,580	3,079,826	2,788,971	2,791,121	3,316,491	15,586,989
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge	55,500	54,140	56,140	44,820	50,150	260,750
4	Total. Add lines 1 through 3	3,666,080	3,133,966	2,845,111	2,835,941	3,366,641	15,847,739
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						15,847,739
Secti	on B. Total Support			بار _{يد} د ــــــــــــــــــــــــــــــــــ		1	
	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	3,666,080	3,133,966	2,845,111	2,835,941	3,366,641	15,847,739
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-171,483	78,711	41,640	15 <u>,</u> 902	15,873	-19,357
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	3,736					3,736
11	Total support. Add lines 7 through 10						15,832,118
12	Gross receipts from related activities, etc.					12	274,890
13	First five years. If the Form 990 is for th	-			-		
	organization, check this box and stop her				<u> </u>	<u> </u>	
	on C. Computation of Public Suppor						
14	Public support percentage for 2013 (line 6		•			14	100.0 %
15 16a	Public support percentage from 2012 Sch 331/3% support test—2013. If the organiz					15 mg/s or more of	99.770 %
IUa	box and stop here. The organization qual						
b	331/3% support test—2012. If the organicheck this box and stop here. The organi	ization did not zation qualifies	check a box as a publicly	on line 13 or supported orga	16a, and line anization .	15 is 33 ¹ / ₃ %	or more, . ▶ □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "fa organization	ets the "facts-a	ınd-circumstar	nces" test, che	ck this box an	d stop here. E	xplain in
b 18	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization me supported organization	on meets the eets the "facts	"facts-and-cir -and-circumst oox on line 13,	cumstances" (ances" test. Th 16a, 16b, 17a,	test, check the organization	is box and stongular qualifies as a second this box and second sec	pp here. publicly .
		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	· - L

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ii tile organization ialis to quality	under the te	solo lioted bei	ow, piease ci	ompiete Fait	11. <i>j</i>	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities		_	_			
	furnished in any activity that is related to the						
	organization's tax-exempt purpose .						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the					_	
	organization's benefit and either paid		1				
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5		ļ <u>.</u>				
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .		<u> </u>				
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b				-		<u> </u>
8	Public support (Subtract line 7c from						
<u> </u>	line 6.)						
	on B. Total Support	4) 6			T		
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	<u> </u>		 			
าบล	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar sources			}			
J.	·						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975						
_	'	· · · - ·	 				
C	Add lines 10a and 10b		1				
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						
40	- -	_					
12	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part IV.)					ļ	
12	Total support. (Add lines 9, 10c, 11,		 				
13	and 12)			•			
14	First five years. If the Form 990 is for the	e organization	n'e firet econ	d third fourth	or fifth toy y	ar as a sootia	n 501/a\/2\
17	organization, check this box and stop he						
Socti	on C. Computation of Public Suppor		· · · · ·		· · · ·	• • • •	· · • 📙
15	Public support percentage for 2013 (line 8			3 column (ft)		15	0/
16	Public support percentage for 2013 (line of Public support percentage from 2012 Sch					16	%
	on D. Computation of Investment Inc			<u> </u>	· · · ·	101	
17	Investment income percentage for 2013 (v line 13 colur	mn (fl)	17	
18	Investment income percentage for 2013 (-		18	
10 19a	33 ¹ / ₃ % support tests—2013. If the organi						
154	17 is not more than 33½%, check this box						
ь	33 ¹ / ₃ % support tests—2012. If the organiz		_	•		_	
D	line 18 is not more than 331/3%, check this is						
20	Private foundation. If the organization di		=	-			
LU	Trivate regression in the organization of	a not officer a	DON OH HIRO 14	· · · · · · · · · · · · · · · · · · ·	MICON LING DOX	いいい うしぜ けいろけんし	JUJI 🚩 I I

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 See separate instructions.
 Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B
- · Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B Do not complete Part II-A

	· // · ·	The Form COO Bort IV line 5 (Drawn)		. "	•
	•	s," to Form 990, Part IV, line 5 (Proxy	lax) or Form 990-E	:z, Part v, line 35c (Prox)	rax), then
	ection 501(c)(4), (5), or (6) orga of organization	anizations Complete Part III		Employer ic	lentification number
	NA FOUNDATION FOR 1 FO	AL CEDITOES AND EDUCATION			95-3351710
Part	-A Complete if the	GAL SERVICES AND EDUCATION e organization is exempt und	er section 5016	c) or is a section 52	7 organization.
1		the organization's direct and indire			
2	· · · · · · · · · · · · · · · · · · ·			-	\$
3	Volunteer hours				
_					
Part	I-B Complete if the	e organization is exempt und	er section 501(c)(3).	
1		excise tax incurred by the organiza			\$
2	Enter the amount of any	excise tax incurred by organization	n managers under	section 4955 ▶	\$
3	If the organization incurre	ed a section 4955 tax, did it file For	rm 4720 for this ye	ear?	Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part				
Part		e organization is exempt und)1(c)(3).
1		ly expended by the filing organiz			
	activities				\$
2		filing organization's funds contrib	_	_	•
_	· ·	vities		•	\$
3	•	expenditures. Add lines 1 and 2			•
_					\$
4		n file Form 1120-POL for this year			
5		ses and employer identification nur			
		ents. For each organization listed, on tributions received that were pro			
		fund or a political action committee			
	ao a coparato cogregatoa			<u> </u>	The state of the s
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization If
					none, enter -0-
/4\				-	
(1)					
(2)					
(2)					
(3)					
(0)					
(4)					
·"				_	
(5)					
(6)					
. ,				1	

Dago	2
rage	~

Par	t II-A Complete if the organizat	ion is exempt ι	ınder section 5	01(c)(3) and file	d Form 5768 (ele	ection under
	section 501(h)). Check ▶ ☐ if the filing organization be name, address, EIN, exp	enses, and sha	re of excess lobl	oying expenditu	res).	oup member's
<u>B</u> (check 🕨 🗌 if the filing organization of			trol" provisions a	apply.	
	Limits on Lo (The term "expenditures"	bbying Expendit means amounts)	(a) Filing organization's totals	(b) Affiliated group totals
1a b c d e f		ce a legislative bo 1a and 1b) . dd lines 1c and 1	ody (direct lobbying	g)		
	If the amount on line 1e, column (a) or (b)		nontaxable amoun	t is:		
	Not over \$500,000	20% of the an	nount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter	25% of line 1f)				
h	Subtract line 1g from line 1a. If zero or					
i	Subtract line 1f from line 1c. If zero or	•				
	If there is an amount other than zer reporting section 4911 tax for this year			the organization	i file Form 4720	Yes No
	(Some organizations that n	nade a section 5	Period Under Sec 01(h) election do ctions for lines 2a	not have to com		•
	Lobbyi	ng Expenditures	During 4-Year Av	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	224.022	244.055			646,687

	Lobbyii	ng Expenditures D	uring 4-Year Ave	raging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	334.832	311.855			646,687
b	Lobbying ceiling amount (150% of line 2a, column (e))					
С	Total lobbying expenditures	67	. 4			74
d	Grassroots nontaxable amount	83.708	77.964			161,672
е	Grassroots ceiling amount (150% of line 2d, column (e))					242,508
f	Grassroots lobbying expenditures					

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fil (election under section 501(h)).	led	Forn	5768		
For (each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(2	3)		(b)	
	the contract of the contract o	Yes	No	A	moun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part		<u> </u>		otion		
rait	501(c)(6).	ی, ر	<i>,</i> 36	Cuon		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	Ļ	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	<u> </u>	
3 Part	Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6)			<u> </u>	<u> </u>	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR answered "Yes."				line	3, is
1	Dues, assessments and similar amounts from members	٠. ا	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).					
a	Current year		2a			
b	Carryover from last year		2b			
с 3	Total		2c 3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		3			
•	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
	and political expenditure next year?	.	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	.	5			
Par						
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group -B, line 1. Also, complete this part for any additional information.	p list); Par	t II-A, I	ine 2,	and

Schedule C (For	rm 990 or 990-EZ) 2013	Page 4
Part IV	Supplemental Information (continued)	

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Name of	the or	ganization		Employe	er identificatio	n number
ARIZON	IA FO	UNDATION FOR LEGAL SERVICES AND EDUCATION		1		51710
Part		Organizations Maintaining Donor Advised Funds of	or Other Similar Fur	nds or /	Accounts.	
		Complete if the organization answered "Yes" to Form	990, Part IV, line 6.			
		(a) Donor ac	lvised funds	(b) Funds and c	other accounts
1	Total	number at end of year				
2	Aggre	egate contributions to (during year) .				
3	Aggre	egate grants from (during year)				
		egate value at end of year				
5	Did t	he organization inform all donors and donor advisors in wr	iting that the assets h	neld in d	Ionor advise	ed
	funds	are the organization's property, subject to the organization's	s exclusive legal contr	ol?		☐ Yes ☐ No
		ne organization inform all grantees, donors, and donor advis				
	•	for charitable purposes and not for the benefit of the donor	or donor advisor, or f	for any o	other purpo:	se
	confe	erring impermissible private benefit?				🗌 Yes 🗌 No
Part	11	Conservation Easements.				
		Complete if the organization answered "Yes" to Form	990, Part IV, line 7.			
1	Purpo	ose(s) of conservation easements held by the organization (cl	heck all that apply).			
	☐ Pı	reservation of land for public use (e g , recreation or education	n) 🗌 Preservation o	f an hist	orically imp	ortant land area
	☐ Pi	rotection of natural habitat	☐ Preservation of	f a certif	fied historic	structure
	Pr	reservation of open space				
2	Comp	plete lines 2a through 2d if the organization held a qualified c	onservation contribute	on in the	form of a c	onservation
	easer	nent on the last day of the tax year.		[Held at	the End of the Tax Year
а	Total	number of conservation easements			2a	
b	Total	acreage restricted by conservation easements		[2b	
С	Numb	per of conservation easements on a certified historic structur	e included in (a)	[2c	
d	Numb	per of conservation easements included in (c) acquired at	ter 8/17/06, and not	on a		
		ric structure listed in the National Register			2d	
3	Numb	per of conservation easements modified, transferred, release	d, extinguished, or teri	minated	by the orga	nization during the
	tax ye	ear >				
4	Numb	per of states where property subject to conservation easeme	nt is located ▶		_	
		the organization have a written policy regarding the pe		spection	handling	of
,	violat	ions, and enforcement of the conservation easements it hold	s?			☐ Yes ☐ No
6	Staff	and volunteer hours devoted to monitoring, inspecting, and ϵ	enforcing conservation	easeme	ents during t	the year
ĺ	>					
7 .	Amou	int of expenses incurred in monitoring, inspecting, and enforce	cing conservation ease	ements o	during the y	ear
1	▶\$					
		each conservation easement reported on line 2(d) above sat	isfy the requirements (of sectio	n 170(h)(4)(i	B)
1	(ı) and	d section 170(h)(4)(B)(II)?				🗌 Yes 🗌 No
9	In Pai	t XIII, describe how the organization reports conservation ea	sements in its revenue	and ex	pense state	ment, and
		ce sheet, and include, if applicable, the text of the footnote t	o the organization's fir	nancial s	tatements t	hat describes the
		ization's accounting for conservation easements.				·
Part	Ш	Organizations Maintaining Collections of Art, Histo		Other	Similar As	ssets.
		Complete if the organization answered "Yes" to Form				
		organization elected, as permitted under SFAS 116 (ASC 9)				
		s of art, historical treasures, or other similar assets held for				
	•	service, provide, in Part XIII, the text of the footnote to its fil				
		organization elected, as permitted under SFAS 116 (ASC				
		s of art, historical treasures, or other similar assets held for	•	ducation	, or researd	ch in furtherance of
		service, provide the following amounts relating to these iter				
((i) Re	evenues included in Form 990, Part VIII, line 1 sets included in Form 990, Part X			. ▶ \$	
	(ii) As	sets included in Form 990, Part X			. ▶ \$	
2	If the	organization received or held works of art, historical treas	sures, or other similar	assets	for financia	al gain, provide the
		ring amounts required to be reported under SFAS 116 (ASC s	· -			
		nues included in Form 990, Part VIII, line 1				***************************************
b	Asset	s included in Form 990, Part X			. ▶ \$	

	9	~	_	

0011000	10 D (1 0111 000) 2010							1 29	-
Par	III Organizations Maintaining								
3	Using the organization's acquisition, collection items (check all that apply):		ther reco	rds, chec	k any of th	ne follov	ving that are a	significant use of	ıts
а									
b	Scholarly research e Other								
C	☐ Preservation for future generations								
4	Provide a description of the organizat	tion's collections	and expl	aın how t	hey further	the org	janization's ex	empt purpose in P	ar
	XIII.		_	_				_	
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?								
Part	Complete if the organization 990, Part X, line 21.		s" to For	m 990, F	Part IV, line	e 9, or ı	reported an a	mount on Form	
1a	Is the organization an agent, trustee,	custodian or oth	ner intern	nediary fo	or contribu	tions or	other assets	not	
	included on Form 990, Part X?			-				· 🔲 Yes 🗆 N	46
b	If "Yes," explain the arrangement in Pa							. [] 163 [] [•0
	in 103, explain the arrangement in 1	art Am and compr	010 1110 10	moving a	ubic.			Amount	
С	Beginning balance					1c			
d	Additions during the year					1d			_
e	Distributions during the year					1e			_
f	·					1f		· · · · · · · · · · · · · · · · · · ·	_
2a	Did the organization include an amour	nt on Form 990, P	art X, line	217				. 🗌 Yes 🗌 N	40
b	If "Yes," explain the arrangement in Pa				n has been	provide	ed in Part XIII		
Par						· · · · ·			
	Complete if the organization	answered "Yes	" to For	n 990, F	Part IV, line	e 10.			
		(a) Current year		or year	(c) Two yea		(d) Three years ba	ick (e) Four years bac	:k
1a	Beginning of year balance			_					
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of t		nd balanc	e (line 1g	ı, column (a	a)) held a	as:		
а	Board designated or quasi-endowmer	nt ▶	%						
b	Permanent endowment ▶	%							
C	Temporarily restricted endowment ▶	%							
_	The percentages in lines 2a, 2b, and 2								
3a	Are there endowment funds not in the	e possession of the	ne organi	zation tha	at are held	and ad	ministered for		
	organization by:							Yes N	0
	(i) unrelated organizations							. 3a(i)	
	(ii) related organizations							. 3a(ii)	
b	If "Yes" to 3a(ii), are the related organi		•					. 3b	
4	Describe in Part XIII the intended uses		on's enac	owment to	unas.				
Part			" to Form	~ 000 B	ort IV/ line	. 110 0	`aa Earm 000	Dort V. Iron 10	
	Complete if the organization			ĭ					_
	Description of property	(a) Cost or of (investm			or other basis ther)		Accumulated preciation	(d) Book value	
	Land		•	,-	· · · · · · · · · · · · · · · · · · ·				
b	Buildings	- <u>-</u> -							
c	Leasehold improvements				19,576		16,423	3,15	53
d	Equipment				347,072		308,739	38,33	
e	Other							20/00	
	Add lines 1a through 1e (Column (d) m	nust equal Form 9	90, Part)	K, column	(B), line 10)(c).) .		41,48	B6

Part VII	Investments – Other Securi Complete if the organization		rm 991	0, Part IV, line	11b. See Form	n 990, Part X, line 12.
	(a) Description of security or cat (including name of security	egory		b) Book value	(c) Me	thod of valuation d-of-year market value
(1) Financial	derivatives					
(2) Closely-h	neld equity interests					
(3) Other						
(^)			<u> </u>			
(B)			<u> </u>			
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	b) must equal Form 990, Part X, col (B) line 12		<u> </u>			
Part VIII	Investments—Program Rel		004		44 0 =	202 5
	Complete if the organization					
	(a) Description of investmen	nt	(b) Book value		ethod of valuation i-of-year market value
(1)						-
(2)						
(3)			 			
(4)		·	 			 -
(5)			 			
(6) (7)						
(8)	<u> </u>		 			
(9)			 			_=-
	b) must equal Form 990, Part X, col (B) line 13.) ▶				
Part IX	Other Assets.					
	Complete if the organization	answered "Yes" to For	m 990), Part IV, line	11d. See Form	990, Part X, line 15.
		(a) Description				(b) Book value
(1)						
(2)						
(3)		•				
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	mn (b) must equal Form 990, Part .	X, col (B) line 15.)	· ·	<u></u>	<u></u> ▶	
Part X	Other Liabilities.					
	Complete if the organization	answered "Yes" to For	m 990), Part IV, line	11e or 11f. See	Form 990, Part X,
	line 25.					
1.	(a) Description of liability	(b) Book value				
(1) Federal in	come taxes					
(2)		· · · · · · · · · · · · · · · · · · ·				
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)	a) must equal Form 000. Post V and (D) for 05	1				
	b) must equal Form 990, Part X, col. (B) line 25.			the energy ! !	- E	
🕰 Liability for	uncertain tax positions In Part XIII, p	provide the text of the footh	iote to 1	me organization?	s iinancial stateme	ents that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Par	Reconciliation of Revenue per Audited Financial Staten Complete if the organization answered "Yes" to Form 990,		•	Return.	
1	Total revenue, gains, and other support per audited financial statements			1	3,634,901
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	23,134		
b	Donated services and use of facilities	2b	182,497		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d			2e	205,631
3	Subtract line 2e from line 1			3	3,429,270
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b		·		
b	Other (Describe in Part XIII.)	4b			
_C				4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	3,429,270
Part	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990,		•	r Keturn.	
1	Total expenses and losses per audited financial statements			1	3,726,827
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	182,497		
b	Prior year adjustments	2b			
С	Other losses	2c		į l	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	182,497
3	Subtract line 2e from line 1	; · .·		3	3,544,330
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	investment expenses not included on Form 990, Part VIII, line 7b	1 1			
b	Other (Describe in Part XIII.)				_
C	Add lines 4a and 4b		1	4c	2 544 222
5 Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.	110 10.) .	• • • • •	5	3,544,330
2; Par PART	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a are t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part III, LINE 4. THE FOUNDATION'S ART COLLECTION, "SYMBOLS OF JUSTICE" T DESIGNED TO FURTHER THE UNDERSTANDING OF THE VALUES INTEGRA	t to provide ", IS ON LO	e any additional int NG-TERM LOAN AT	formation.	
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				·	·

Schedule D (Fo	rm 990) 2013	Page 5
Part XIII	Supplemental Information (continued)	
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SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22

► Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs gov/form990.

OMB No 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ARIZONA FOUNDATION FOR LEGAL SERVICES AND EDUCATION 95

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 95-3351710 the selection criteria used to award the grants or assistance? ☐ No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AGAINST ABUSE INC 119 N							LEGAL SERVICES
FLORENCE CASA GRANDE 85222	4-2856310	501(C)3	13,117				GRANT
(2) CATHOLIC CHARITIES SE P O							DOMESTIC
BOX 1777 BISBEE, AZ 85603	86-0223999	501(C)3	16,805		<u> </u>		VIOLENCE GRANT
(3) INTERAGENCY COUNCIL LAKE							DOMESTIC
HAVASU, 1940 MESQUITE LH 86403	86-0516654	501(C)3	9,707				VIOLENCE GRANT
(4) CATHOLIC CHARITIES WEST							DOMESTIC
AZ690 E 32ND AVE YUMA 85365	86-0223999	501(C)3	15,365				VIOLENCE GRANT
(5) KINGMAN AID TO ABUSED							DOMESTIC
2701 E ANDYDEVINE AZ 86401	86-0601113	501(C)3	18,279				VIOLENCE GRANT
(6) DNA PEOPLES LEGALSVCS PO							DOMESTIC
BOX 306 WINDOW ROCK AZ 86515	86-0207220	501(C)3	120,412				& LEGAL SERVICE GRANT
(7) MT GRAHAM SAFEHOUSE							DOMESTIC
PO BOX 1202, SAFFORD, AZ 85546	86-0800990	501(C)3	12,637				VIOLENCE GRANT
(8) EMERGE CENTER AGAINST							DOMESTIC ,
DV 2545 ADAMS ST AZ 85716	86-0312162	501(C)3	26,500				VIOLENCE GRANT
(9) NEW HOPE RANCH							DOMESTIC
PO BOX 1589, ST JOHNS, AZ 85936	86-0894950	501(C)3	9,151				VIOLENCE GRANT
(10) NORTHLAND FAM HELP CENT							DOMESTIC
320 N LEROUX ST , C AZ 86001	86-0351566	501(C)3	16,554				VIOLENCE GRANT
(11) SOUTHERN AZ LEGAL AID							LEGAL SERVICES
64 E BROADWAY TUCSON 85701	86-0143449	501(C)3	523,364				& DV GRANT
(12) TIME OUT, PO BOX 306							DOMESTIC
PAYSON, AZ 85547	86-0723051	501(C)3	9,147				VIOLENCE GRANT
2 Enter total number of section	501(c)(3) and gov	ernment organiza	itions listed in the l	ne 1 table			continued

2	Enter total number of	f section 501(c)(3) and	government	organizations	listed in the line 1	1 table
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Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 50055P

Schedule I (Form 990) (2013)

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete If the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service ▶ Information about Schedule I (Form 990) and its instructions is at www.irs gov/form990 OMB No 1545-0047 2013

Name of the organization					9		Employer identification number
ARIZONA FOUNDATION FOR LEGAL							95-3351710
Part I General Information							
 Does the organization mainta 			unt of the grants or	assistance, the	grantees' eligibility f	or the grants or as	sistance, and
the selection criteria used to	award the grants	or assistance?					🗌 Yes 🔲 No
Describe in Part IV the organi							
Part II Grants and Other As Part IV, line 21, for an							n answered "Yes" to Form 990
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description non-cash assista	
(1) PAGE REG DOMESTIC VIOL							DOMESTIC
56 6TH AVE, PAGE AZ 86040	86-0838347	501(C)3	12,907				VIOLENCE GRANT
(2) SOJOURNER CENTER, PO BOX							DOMESTIC
20156, PHOENIX, AZ 85036	94-2465081	501(C)3	34,258				VIOLENCE GRANT
(3) COMMUNITY LEGAL SVCS PO							LEGAL SERVICES
BOX 21538 PHOENIX AZ 85036	86-0166615	501(C)3	723,441				GRANT
(4) VERDE VALLEY SANCTUARY							DOMESTIC
PO BOX 595, SEDONA, AZ 86339	86-0741314	501(C)3	14,892				VIOLENCE GRANT
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)				<u> </u>			
(40)							
(12)							
2 Enter total number of section	501(c)(3) and gov	ernment organiza	tions listed in the l	ine 1 table			▶ 16
3 Enter total number of other or	rganizations listed	in the line 1 table)				▶ 0

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 50055P

Schedule I (Form 990) (2013)

Schedule I (Form 990) (2013) Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed (b) Number of recipients (c) Amount of cash grant (d) Amount of non-cash assistance (e) Method of valuation (book, FMV appraisal, other) (a) Type of grant or assistance (f) Description of non-cash assistance 1 (1) LOAN FORGIVENESS 6,269 6 Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information PROCEDURES FOR MONITORING GRANTS IN THE US- PART 1 LINE 2 SCHEDULE I, PART I, LINE 2- EACH YEAR, THE FOUNDATION CONDUCTS CONTRACT COMPLIANCE MONITORING WITH EACH GRANTEE AND SUB-CONTRACTOR THAT RECEIVES FUNDING FROM OR THROUGH THE FOUNDATION THE LEVEL OF COMPLIANCE REVIEW AND CONTRACT OVERSIGHT IS DEPENDENT UPON THE FUNDING SOURCE, CONTRACTUAL REQUIREMENTS AND SERVICES BEING CONTRACTED THE COMPLIANCE REVIEW AND CONTRACT OVERSIGHT PROVIDED BY THE FOUNDATION MAY INCLUDE SOME OR ALL OF THE FOLLOWING ACTIVITIES (1) ON-SITE COMPLIANCE MONITORING THAT COVERS PROGRAMMATIC, FISCAL, AND ADMINISTRATIVE ACTIVITIES (2) ANNUAL AND MULTIYEAR AUDITED FINANCIAL STATEMENT REVIEW (3)MONTHLY/QUARTERLY REVIEW OF THE FINANCIAL AND PROGRAMMATIC EXPENDITURE REPORTS (4)ONGOING TECHNICAL ASSISTANCE AND TRAINING ON LEGAL, PROGRAMMATIC AND ADMINISTRATIVE ACTIVITIES, AND THE COORDINATION AND FACILITATION OF ORIENTATION/REVIEW OF REPORTING AND COMPLIANCE REQUIREMENTS

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

ach to Form 000 or 000 E7

► Attach to Form 990 or 990-EZ.

Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

20**13** Open to Public

Inspection

Name of the organization Employer identification number ARIZONA FOUNDATION FOR LEGAL SERVICES AND EDUCATION 95-3351710 FORM 990, PART I, LINE, DESCRIPTION OF ORGANIZATION MISSION PURPOSES, WHICH INCLUDES CARRYING ON THE FOLLOWING PURPOSES, BOTH DIRECTLY AND BY THE APPLICATION OF ASSETS TO THE USE OF THE ARIZONA BAR FOUNDATION, OR TO ANY OTHER CORPORATION, TRUST, FUND OR FOUNDATION WHOSE PURPOSES AND OPERATION ARE CHARITABLE, SCIENTIFIC, LITERACY, OR EDUCATIONAL. (A) TO FOSTER AND MAINTAIN THE HONOR AND INTEGRITY OF THE PROFESSION OF THE LAW, (B) TO STUDY, IMPROVE AND TO FACILITATE THE ADMINISTRATION OF JUSTICE; (C) TO PROMOTE THE STUDY OF THE LAW AND RESEARCH THEREIN, THE DIFFUSION OF KNOWLEDGE THEREOF, AND THE CONTINUING EDUCATION OF LAWYERS; (D) TO ACT AS A RESOURCE CENTER FOR THE PROMOTION OF LAW-RELATED EDUCATION; (E) TO SUPPORT PROGRAMS DESIGNED TO ASSIST IN THE DELIVERY OF LEGAL SERVICES TO THE MARGINALIZED FOR LAW-RELATED EDUCATION, A PROGRAM DESIGNED TO TEACH YOUNG PEOPLE, EDUCATORS AND OTHER ADULTS ABOUT THE LAW. THE LEGAL PROCESS AND THE LEGAL SYSTEM. FORM 990, PART VI, SECTION A, LINE2: EACH YEAR OUR BOARD SIGNS A CONFLICT OF INTEREST STATEMENT OUTLINING THAT IF THERE ARE ANY CONFLICTS DUE TO THEIR RELATIONSHIPS THEY SHOULD DISCLOSE THEM THROUGHOUT THE YEAR. DUE TO THE SPECIFIC FOCUS OF OUR MISSION (PROMOTING ACCESS TO JUSTICE FOR ALL) IT WOULD BE HIGHLY LIKELY THAT THERE ARE INTERRELATIONSHIPS IN A BOARD CHOSEN FOR THE EXPERTISE IN THIS NARROW FOCUS OUR BOARD IS COMPRISED OF SEVERAL MEMBERS REPRESENTING PUBLIC LAWYERS, PRIVATE LAWYERS, AND PEOPLE WORKING CLOSELY IN ACCESS TO JUSTICE. FOR EXAMPLE, THERE ARE TWO BOARD MEMBERS WHO ARE FROM THE SAME FIRM. ALSO, OUR BOARD MEMBERS (LAWYERS OR THEIR LAW FIRMS) MAY APPEAR BEFORE JUDGES (ALSO BOARD MEMBERS). ALSO, A BOARD MEMBER (COURT REPORTER) MAY BE ASSIGNED TO A JUDGES AND/OR ATTORNEYS WHO ARE ALSO BOARD MEMBERS. FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS SUBMITTED TO THE FINANCE COMMITTEE FOR CLOSE REVIEW AND DISCUSSION. UPON CHANGES MADE AS NEEDED, APPROVAL AND RECOMMENDATION OF ACCEPTANCE FROM THE FINANCE COMMITTEE, FORM 990 COPIES ARE DISTRIBUTED TO THE ENTIRE BOARD MEMBERSHIP FOR REVIEW. THE BOARD COMMENTS AND REACHES CONSENSUS ON APPROVING THE FINANCE COMMITTEE RECOMMENDATION OR ASKS FOR FURTHER CHANGES AND/OR **CLARIFICATIONS.**

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer identification number
ARIZONA FOUNDATION FOR LEGAL SERVICES AND EDUCATION	95-3351710
FORM 990, PART VI, SECTION B, LINE 12C. THE BOARD MEMBERS ANNUALLY REVIEW AND SIGN THE	CONFLICT OF INTEREST POLICY.
THE STAFF REVIEWS THE COMING AGENDAS AND DISCUSSES WITH BOARD MEMBERS WHERE THEY	BELIEVE THERE MAY BE A
CONFLICT. CONFLICTS ARE DECLARED AT THE BEGINNING OF THE DISCUSSION AND ANY ABSTENTI	ONS ARE NOTED IN THE MINUTES.
THE STAFF ALSO SIGNS AND REVIEWS THE CONFLICT OF INTEREST POLLICIES AND THE IMPORTANC	E OF ADHERENCE TO THIS AND
OTHER POLICIES ARE THE TOPIC OF AN ALL STAFF MEETING ANNUALLY.	
FORM 990, PART VI, SECTION B, LINE 15: THE PROCESS FOR DETERMINING COMPENSATION OF THE (DRGANIZATION'S OFFICER
INCLUDES A COMPARISON OF OTHER STATE'S IOLTA DIRECTORS, A REVIEW OF THE ASU LODESTAR	CENTER NON-PROFIT
COMPENSATION/BENEFITS REPORT, APPROVAL BY THE EXECUTIVE COMMITTEE, AND THE DECISION	IS PROPERLY DOCUMENTED BY
THE EXECUTIVE COMMITTEE.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, (CONFLICT OF INTEREST POLICY,
AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AND BY POSTING SUCH IN	FORMATION ON THE
ORGANIZATION'S WEBSITE.	